

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Patent Application Serial No. 10/502,240
Filing Date July 21, 2004
Inventor Sadao Omata
Assignee Nihon University
Group Art Unit 3736
Examiner Kristin D. Rogers
Customer No. 021567
Attorney Docket No. IS14-002
Title: Elasticity Measuring Device for Biological Tissue

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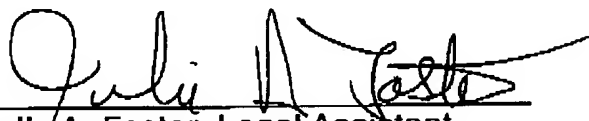
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Julie A. Foster, Legal Assistant
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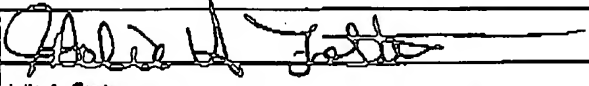
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10502,240
	Filing Date	July 21, 2004
	First Named Inventor	Sadeo Omata
	Art Unit	9738
	Examiner Name	Kristin D. Rogers
Total Number of Pages in This Submission	Attorney Docket Number	IS14-002

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): -Certificate of Facsimile Transmission -Examiner Interview Summary of October 20, 2006.
Remarks Customer No. 021567		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Wells St. John, P.S.		
Signature			
Printed name	D. Brent Kenady		
Date	10-20-06	Reg. No.	40,045

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Typed or printed name	Julie A. Foster
Date	October 20, 2006

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EXAMINER INTERVIEW SUMMARY OF OCTOBER 20, 2006

To: Commissioner for Patents
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Applicant's representative held an interview with Examiner Rogers on October 20, 2006. Applicant's representative would like to thank Examiner Rogers for her time and attention to this matter.

Applicant's representative pointed out to the Examiner that, in paragraph 7 on page 3 of the Office Action dated October 5, 2006, claim 14 should be included in the list of rejected claims since claim 14 is addressed as being rejected on page 5. The Examiner agreed to correct this omission.


Applicant's representative is greatly appreciative of the efforts and time put in to this matter by Examiner Rogers.

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IS14-002

Respectfully submitted,

Dated: 10-20-06

By: 
D. Brent Kenady
Reg. No. 40,045